REQUEST FOR APPLICATIONS

SUD Treatment & Recovery Services for Adolescents, Transitional Age Youth Housing Support and LGBTQ+ Populations
DMH23-004CK-RFA

RFA Posted	July 5, 2022		
Questions Due	July 19, 2022 by 5:00 pm EST		
Applications Due	August 2, 2022 by 5:00 pm EST		
Anticipated Notice of Award	August 16, 2022		
Anticipated Performance Period	September 1, 2022 – September 30, 2025 March 14, 2023		
Services	 Supporting Transitional Age Youth with SUD in Need of Recovery Housing Residential Substance Use Disorder Treatment for Adolescents Developing SUD Treatment & Recovery Services for LGBTQ+ Populations 		
Issuing Agency	NC Department of Health and Human Services Division of Mental Health, Developmental Disabilities, and Substance Abuse Services (DMH/DD/SAS)		
E-mail Applications and Questions to	DMH/DD/SAS Contracts Team	Email	RFA.responses@dhhs.nc.gov

THIS REQUEST FOR APPLICATIONS (RFA) advertises the Division's need for the services described herein and solicits applications offering to provide those services pursuant to the specifications, terms and conditions specified herein. All applications received shall be treated as offers to contract. If the Division decides to accept an application, an authorized representative of the Department will sign in the space provided below. Acceptance shall create a contract that is effective as specified below.

THE UNDERSIGNED HEREBY SUBMITS THE FOLLOWING APPLICATION AND CERTIFIES THAT: (1) he or she is authorized to bind the named Grantee to the terms of this RFA and Application; (2) the Grantee hereby offers and agrees to provide services in the manner and at the costs described in this RFA and Application; (3) this Application shall be valid for 60 days after the end of the application period in which it is submitted.

To Be Completed By Contractor:

Contractor Name:	Catchment Area # (see p.5):
Contractor's Street Address:	E-Mail Address:
City, State & Street Address Zip:	Telephone Number:
Name & Title of Authorized Representative:	DUNS Number:
Signature of Authorized Representative:	Date:

Unsigned or Incomplete Applications Shall Be Returned Without Being Reviewed

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_,	Signature of Authorized Representative	Printed Name of Authorized Representative	Title of Authorized Representative	_

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1.0 OVERVIEW

This RFA contains funding opportunities in three different categories. Applicants may apply for one or more of the following opportunities.

The funding opportunities are as follows:

1. Supporting Transitional Age Youth (TAY) with SUD in Need of Recovery Housing

North Carolina has a TAY population of over 1 million individuals.¹ TAY in North Carolina experience a substance use disorder prevalence rate of 13.68%², representing more than 162,000 individuals. Current estimates suggest that roughly 50% of individuals with a substance use disorder also experience a co-occurring mental health disorder.³ Roughly 4% of youth and adults in North Carolina experience a problem gambling disorder⁴, with 77% of males and 58% of females between age 14-21 reporting gambling in the past year⁵. Of the individuals experiencing a problem gambling disorder, 57.5% also experience a cooccurring SUD⁶,⁷.

The Division of Mental Health, Developmental Disabilities and Substance Abuse Services (DMH/DD/SAS) plans to use a portion of the SABG COVID-19 funding awarded to North Carolina to support TAY with a primary SUD diagnosis who need recovery supported housing. The primary purpose is to encourage the development of a recovery housing program that will support TAY with addressing their SUD treatment and non-treatment needs.

2. Residential Substance Use Disorder Treatment for Adolescents

Current estimates suggest that between 60-75% of adolescents with a substance use disorder also experience a co-occurring mental health disorder. Current North Carolina Treatment Outcomes and Program Performance System (NC-TOPPS) data shows that in 2021, 23% of adolescents receiving stated funded substance use disorder (SUD) treatment services had been admitted to a psychiatric inpatient hospital in the three months before beginning SUD services. Roughly 4% of youth and adults in North Carolina experience a problem gambling disorder, with 77% of males and 58% of females between age 14-21 reporting gambling in the past year. Of the individuals experiencing a problem gambling disorder, 57.5% also experience a co-occurring SUD.

The primary purpose is to support the establishment of two additional adolescent residential treatment programs that can meet the needs of youth (12-17 years old) with a substance use disorder and who may also be experiencing a co-occurring mental health and/or gambling/gaming disorder. The residential treatment program will be required to align with the American Society of Addiction Medicine (ASAM) definition of an ASAM 3.5 program. At present, adolescent residential SUD programs funded through the Division are licensed as either a Substance Abuse Intensive Outpatient (SAIOP) and/or Day Treatment program and under 10A NCAC 27G .5600D or 10A NCAC 27G .3400 for the provision of treatment services. These programs use Group Living – moderate intensity or Group Living – high intensity, depending on their licensure type, to fund the residential component, room and board and other non-Medicaid or NC Health Choice billable services and supports. The successful applicant must take a similar approach to ensure appropriate reimbursement for treatment services and room and board.

3. Developing SUD Treatment & Recovery Services for LGBTQ+ Populations

¹ https://demography.osbm.nc.gov/explore/?sort=modified

https://www.samhsa.gov/data/report/2018-2019-nsduh-state-prevalence-estimates

³ https://www.nimh.nih.gov/health/topics/substance-use-and-mental-health

More than a game NC

⁵ Ibid

⁶ Ibid

⁷ Gambling disorder in adolescence - National Institutes of Health

According to the Center of Excellence on LGBTQ+ Behavioral Health Equity, lesbian, gay, bisexual, transgender, queer, questioning, intersex and other individuals of diverse sexual orientations and gender identities experience significant behavioral health disparities. These disparities can be attributed to:

- Minority stress
- o Verbal, emotional or physical abuse
- o Discrimination in healthcare, employment and housing
- Bullying in school
- Absence of programs specializing in LGBTQ+ services
- Shortage of providers who are knowledgeable about LGBTQ+-specific services.

Data from the Office of Disease Prevention and Health Promotion, Healthy People 2030, reports that high school students who identify as lesbian, gay, or bisexual are almost twice as likely to use illicit drugs as those who identify as heterosexual. Using illicit drugs is linked to risky sexual behaviors, violence, health issues, and problems in school. Additionally, high school students who identify as lesbian, gay, or bisexual are much more likely to think about suicide than those who identify as heterosexual. Community- and family-based interventions that reduce risky behaviors like alcohol and drug use in lesbian, gay, and bisexual high school students may help reduce thoughts of suicide. Interventions to increase family acceptance of lesbian, gay, and bisexual adolescents can help reduce the rate of illicit drug use in this group.

LGBTQ+ transitional age youth and young adults who report their families rejected them during their adolescence were

- 8.4 times more likely to report having attempted suicide
- 5.9 times more likely to report high levels of depression; and
- 3.4 times more likely to use illegal drugs

compared with peers from families that reported no or low levels of family rejection.⁸

Given the data above, the Division wishes to prioritize the development of a more robust service delivery system that can meet the SUD treatment and recovery needs of youth and adults who identify as LBGTQ+. This portion of this RFA is therefore two-fold: (1) to solicit proposals and select one agency with the experience and interest in providing training and technical assistance to SUD treatment and recovery providers desiring to serve or better serve this population, and (2) to select three or more provider organizations who wish to become more qualified, as an entire agency, to specialize and work with LGBTQ+ individuals seeking SUD treatment services.

1.1 PURPOSE

The primary purposes of this grant are as follows:

- 1. to encourage the development of a recovery housing program that will support TAY with addressing their SUD treatment and non-treatment needs. The successful applicant agencies will be required to establish and maintain a recovery housing program that supports TAY in addressing their SUD treatment needs (e.g., accessing appropriate SUD treatment services, other appropriate health/medical services, and enrolling in health insurance coverage) and non-treatment needs (e.g., long term housing, employment, and education).
- 2. expand and enhance the already existing adolescent network of residential treatment providers across the state. The current adolescent CASP residential providers are located in Buncombe, Guilford, Moore and Pitt

counties. DMH/DD/SAS will prioritize geographic location of the awardee. It is recognized that adolescents seeking substance use disorder treatment often present with other co-occurring mental health and/or gambling/gaming disorders. To support the needs of adolescents seeking SUD services across the state, DMH/DD/SAS is seeking to support the expansion and enhancement of residential treatment services, with an emphasis on adolescents with co-occurring needs. The successful applicants will commit to developing an adolescent residential program capable of meeting the needs of adolescents with co-occurring disorders, ensuring access to psychiatric assessments for medication determinations and access to FDA approved medications for the treatment of SUD (e.g., Buprenorphine). An applicant may have the capabilities to prescribe medications internally or may choose to partner with other agencies capable of providing these services to adolescents. Adolescents with co-occurring disorders can also exhibit challenging behaviors such as aggression and elopement. The successful application must be capable of managing these behaviors using protocols and skills that are appropriate for adolescents.

3. develop a more robust, informed and qualified system to meet the needs of LGBTQ+ individuals with SUD. One organization with expertise and experience in training and technical assistance specific to serving the LGBTQ+ populations to assist selected agencies in changing and improving their cultural readiness and clinical practices to better serve these populations will be selected. Up to three provider agencies who express interest in developing and implementing agency-wide strategies to decrease disparities, stigma and discrimination and who are also staffed to provide evidence-based SUD treatment services will be selected through this RFA process as well.

2.0 ELIGIBILITY

1. Supporting Transitional Age Youth (TAY) with SUD in Need of Recovery Housing

In line with the DHHS goal to expand access to services that promote whole-person care for TAY with a primary SUD diagnosis and in need of recovery supported housing, applicants must show evidence of collaboration and partnership with other relevant agencies/service providers.

An applicant agency must provide a service to TAY or plan on expanding their services to TAY upon award of the grant.

Applicant agencies must be non-profit or not-for-profit entities or tribal government entities.

For applicant agencies that receive funding or reimbursement for services from Medicaid or a state agency (including DMH/DD/SAS), the applicant must not currently be subject to any investigative or corrective actions.

Applicants must demonstrate that they are able to provide the service specifications and standards set forth in this RFA. Award recipients must meet all applicable DMHDDSAS regulations and policies, and conditions and requirements for the SABG grant.

Applicants that are currently providing recovery supported housing services to TAY will be expected to expand capacity and/or enhance current services with these funds. These applicant agencies will be expected to provide a detailed overview of their current recovery supported housing services for TAY, including applicable outcomes, and a comprehensive account for how these implementation funds will be used to enhance services and why these funds are necessary.

2. Residential Substance Use Disorder Treatment for Adolescents

In line with the goal to develop strong infrastructure that allows for expanded access to substance use services,

applicant agencies can be current residential treatment providers seeking to add to their services, or agencies that currently provide other levels of care but who are seeking to add a residential component to their service array.

An applicant agency must have experience of providing behavioral health services (mental health and/or substance use disorder) to adolescents.

Applicant agencies must be non-profit or not-for-profit entities or tribal government entities.

For applicant agencies that receive funding or reimbursement for services from Medicaid or a state agency (including DMH/DD/SAS), the applicant must not currently be subject to any investigative or corrective actions.

Applicants must demonstrate that they are able to provide the service specifications and standards set forth in this RFA. Award recipients must meet all applicable DMH/DD/SAS regulations and policies, and conditions and requirements for the SABG grant.

With the exception of tribal government entities, applicant agencies should be licensed as a SUD treatment provider in the state of North Carolina or be able to obtain the appropriate SUD treatment license if awarded this RFA.

Applicants that are currently providing residential SUD services to adolescents will be expected to expand capacity with these funds.

3. Developing SUD Treatment & Recovery Services for LGBTQ+ Populations

Organizations applying for these funds to provide training and technical assistance must demonstrate experience and expertise in such specific to disparities, bias, agency and environmental readiness, clinical models, best practices, etc. for LGBTQ+ populations.

Provider applicant agencies must have experience of providing behavioral health services (mental health and/or substance use disorder) to adolescents and adults.

For applicant agencies that receive funding or reimbursement for services from Medicaid or a state agency (including DMH/DD/SAS), the applicant must not currently be subject to any investigative or corrective actions.

Applicants must demonstrate that they are able to provide the service specifications and standards set forth in this RFA. Award recipients must meet all applicable DMH/DD/SAS regulations and policies, and conditions and requirements for the SABG grant.

Applicant agencies must be non-profit or not-for-profit entities or tribal government entities.

3.0 AWARD INFORMATION

Supporting Transitional Age Youth (TAY) with SUD in Need of Recovery Housing - The maximum award for this project is \$500,000 per applicant for up to two (2) agencies for the period of September 1, 2022 — September 30, 2025—March 14, 2023. Funds are contingent upon availability. Any extension will be contingent upon successful implementation of strategies and deliverables as defined by the applicant agency and agreed upon by the division, as evidenced by the selection of the awardee, and contingent upon award of such funds by the federal grantor.

Residential Substance Use Disorder Treatment for Adolescents - The maximum award for this project is \$500,000 per applicant for up to two (2) agencies for the period of September 1, 2022 – September 30, 2025 March 14, 2023. Funds are contingent upon availability. Any extension will be contingent upon successful implementation of strategies and deliverables as defined by the applicant agency and agreed upon by the division, as evidenced by the selection of the awardee, and contingent upon award of such funds by the federal grantor.

Developing SUD Treatment & Recovery Services for LGBTQ+ Populations – The maximum award for training and technical assistance is \$250,000 for a single (1) applicant for the period of September 1, 2022 — September 30, 2025 March 14, 2023. The maximum award for treatment providers under this project is \$200,000 per applicant for up to three (3) agencies for the period of September 1, 2022 – September 30, 2025 – March 14, 2023. Funds are contingent upon availability. Any extension will be contingent upon successful implementation of strategies and deliverables as defined by the applicant agency and agreed upon by the division, as evidenced by the selection of the awardee, and contingent upon award of such funds by the federal grantor.

Cost sharing or matching is not required.

3.1 SOURCE OF FUNDS AND PASS THROUGH REQUIREMENTS

Federal Award Identification Number: 1B08TI083540-01

Federal Award Date: March 11, 2020

Subaward Period of Performance: September 1, 2022 – September 30, 2025-March 14, 2023

Amount of Federal Funds Obligated by this Action: \$2,850,000

Total Amount of Federal Funds Obligated to the Subrecipient: tbd based on specific project

Total Amount of the Federal Award: \$42,171,280

Federal Award Project Description: "The SABG program allows states and territories to plan, implement and evaluate activities to prevent, treat and help more people recover from substance use disorder. This funding will also allow recipients to make investments in existing prevention, treatment and recovery infrastructure, promote support for providers and address unique local needs to deliver substance use disorder services."8

Federal Awarding Agency: SAMHSA

Pass-through Entity: N/A DUNS # 8097853630000 CFDA Number: 93.959

CFDA Name: Substance Abuse Prevention and Treatment Block Grant, in accordance with the Coronavirus Response and Relief Supplement Appropriations Act, 2021.

3.2 FEDERAL FUNDING ACCOUNTABILITY AND TRANSPARENCY ACT (FFATA)

As a subrecipient of federal funds, each selected grant recipient will be required to provide certain information required by the Federal Funding Accountability and Transparency Act (FFATA), including the organization's Unique Entity Identifier number, which replaced the DUNS numbering system effective 04.04.22. Please see https://www.gsa.gov/about-us/organization/federal-acquisition-service/office-of-systemsmanagement/integrated-award-environment-iae/iae-systems-information-kit/unique-entity-identifier-update for additional information. Additional information about FFATA is available at https://www.fsrs.gov/.

4.0 DEFINITIONS, ACRONYMS AND ABBREVIATIONS

TAY: Transitional age youth - for the purpose of this RFA is an individual age 18-25 years old DHHS: Department of Health and Human Services <u>DMH/DD/SAS:</u> Division of Mental Health, Developmental Disabilities and Substance Abuse Services

⁸ https://www.samhsa.gov/newsroom/press-announcements/202105181200

<u>FSR:</u> Financial Status Report SUD: Substance use disorder

LGBTQ+: Lesbian, Gay, Bisexual, Transgender, Queer populations

CASP: Cross Area Service Program

LME/MCO: Local Management Entity/Managed Care Organization

FDA: Food & Drug Administration

<u>TA:</u> Technical assistance <u>MH:</u> Mental health

5.0 SCOPE OF WORK

5.1 Programmatic requirements

The successful applicant for these funds will have the following expectations:

Supporting Transitional Age Youth (TAY) with SUD in Need of Recovery Housing

- Provide recovery supported housing for TAY with a primary SUD diagnosis
 - Applicant can either provide recovery supported housing directly or be in partnership with an agency that can directly provide recovery supported housing.
- Assist TAY in having treatment and non-treatment needs met
 - o Use an appropriate screening tool to assist with determining individual needs.
 - o Connect TAY with resources that can meet treatment needs (e.g., healthcare insurance enrollment, accessing appropriate SUD treatment, and accessing dental care).
 - Connect TAY with resources that can meet non-treatment needs (e.g., education, employment, and transportation).
- Educate TAY on areas/topics of need
 - Provide educational materials and resources on areas/topics of need, e.g., budgeting/financial management, diet/exercise, and healthy self-care techniques etc.
- Comply with reporting requirements outlined in section 5.4 of this RFA
 - Submit all required documentation using the reporting forms outlined in section 5.4 of this RFA.
 - Comply with data requests that may originate with the contract administrator.

Residential Substance Use Disorder Treatment for Adolescents

For applicants adding a new service to their work

- Establish an adolescent residential SUD program
 - Develop a program that aligns with the ASAM level 3.5.
 - Implement an evidence-based treatment model that meets the needs of adolescents experiencing SUD and co-occurring SUD & MH disorders.
 - Complete the licensing process and any other steps necessary to operate a SUD residential program for adolescents in North Carolina(not applicable for providers within recognized tribal communities).

For applicants augmenting or expanding an existing service

- Review your existing service to ensure the following
 - o Residential program aligns with the ASAM level 3.5.

• You have or will have an evidence-based treatment model that meets the needs of adolescents experiencing SUD and co-occurring SUD and MH disorders.

For all applicants

- Provide residential SUD treatment services to adolescents
 - Provide a comprehensive clinical assessment or diagnostic assessment that can determine the most appropriate ASAM level of care and treatment needs.
 - Engage the adolescent and his/her family (as appropriate) in SUD treatment services using an evidence-based treatment model (or facilitate admission to the appropriate level of care if not ASAM 3.5).
 - o Ensure educational needs of participants are met.
 - o Provide access to appropriate psychiatric services for assessment and/or medication management.
 - Monitor participant engagement and progress in treatment and ensure appropriate data collection for reporting purposes.
 - o Facilitate referrals to appropriate SUD treatment services when ASAM 3.5 is no longer required.
 - Coordinate with the agencies involved in the participant's life to assist with treatment engagement and retention and to improve treatment outcomes; i.e., DSS, juvenile justice, and pediatrician/physical health care provider etc.
- Educate adolescents and family/caregivers on substance use and SUD
 - Provide educational materials on substance use, SUD, mental health disorders and co-occurring disorders etc. to families/caregivers.
- Comply with reporting requirements outlined in section 5.4 of this RFA

Developing SUD Treatment & Recovery Services for LGBTQ+ Populations

- Provider organizations must have capacity and qualifications to serve youth aged 12 17 who present with a SUD and who identify as LGBTQ+.
- Agencies may additionally have staffing capacity and expertise to serve adults with SUD who also identify as LBGTQ+.
 - Provide a comprehensive clinical assessment or diagnostic assessment that can determine the most appropriate ASAM level of care and treatment needs.
 - Engage the adolescent and his/her family (as appropriate) in SUD treatment services using an evidencebased treatment model.
 - Provide access to appropriate psychiatric services for assessment and/or medication management.
 - Monitor participant engagement and progress in treatment and ensure appropriate data collection for reporting purposes.
 - Coordinate with the agencies involved in the participants life to assist with treatment engagement and retention and to improve treatment outcomes; i.e., DSS, justice, and physical health care provider, etc.
- Educate adolescents and family/caregivers on substance use, SUD, sexual identity, sexual orientation, gender identity, etc.
 - Provide educational materials on substance use, SUD, mental health disorders and co-occurring disorders, sexual identity, sexual orientation, gender identity, etc. to families/caregivers.
- Comply with reporting requirements outlined in section 5.4 of this RFA

5.2 Population Served

Supporting Transitional Age Youth (TAY) with SUD in Need of Recovery Housing

The population to be served under this grant is transitional age youth (TAY) with a primary SUD diagnosis. For this grant, TAY refers to individuals aged between 18-25. The applicant may choose a subset of this population of focus (e.g., ages 18-21 or ages 21-25). If the applicant chooses to select a subset of this population, the rational for doing so should be clearly stated in the application.

Applicants will be expected to identify and reduce differences in access, service use, and outcomes of services among historically marginalized groups, to address health disparities.

Services provided under this grant must not be denied to an individual because of their use of any FDA approved medication for the treatment of SUD. <u>SAMHSA Medication-Assisted Treatment resource.</u>

Residential Substance Use Disorder Treatment for Adolescents

The population to be served is adolescents between 12-17 years old. This program will expand the adolescent SUD system and as a result will be required to provide services to adolescents from across North Carolina.

Developing SUD Treatment & Recovery Services for LGBTQ+ Populations

The populations to be served are adolescents aged 12-17 years old with a SUD who identify as LGBTQ+. Additionally, adults with an SUD and who identify as LGBTQ+ may also be served, but the primary focus must be adolescents.

5.3 PERFORMANCE STANDARDS AND EXPECTATIONS

Applicants shall comply with all federal and state requirements for subawards. The <u>North Carolina State Budget Manual</u> outlines parameters for allowable and unallowable costs at the state level, and the code of federal regulations, title 2, part 200 outlines requirements and restrictions for sub awardees receiving federal awards. Sub awardees must comply with all uniform guidance related to the SABG ARP funding, CFDA: 93.959.

For each specific funding opportunity, please see the following:

TAY:

Applicant will establish a program capable of meeting the needs of TAY with a SUD in need of recovery supported housing.

All TAY engaged by the project will:

- Receive 'Recovery Supported Housing'.
- Be appropriately screened to determine treatment and non-treatment needs.
- Receive educational materials and resources on area/topics of need.

Adolescent Residential:

Applicant will establish a residential SUD treatment program capable of providing treatment services to adolescents with a SUD diagnosis.

All adolescents engaged by the project will:

- Receive SUD treatment services that align with the ASAM 3.5 level of care.
- Receive treatment using an evidence-based model, capable of meeting co-occurring SUD/MH needs.
- Be provided with access to appropriate psychiatric services for mental illness and be provided with appropriate access to medication assisted treatment (MAT) services for the treatment of SUD.

LGBTQ+:

Applicant will develop a SUD treatment program capable of meeting the needs of adolescents and adults who identify as LGBTQ+.

All individuals engaged by the program will:

- Receive a CCA/DA to determine the appropriate ASAM level of care.
- Receive treatment using an appropriate evidence-based model.
- Experience family involvement in treatment (if appropriate).
- Be provided with access to appropriate psychiatric services for mental illness and be provided with appropriate access to medication assisted treatment (MAT) services for the treatment of SUD.
- Receive educational materials and resources on area/topics of need.

5.4 REPORTING REQUIREMENTS

The successful applicant will be expected to collect data on the demographics of the individuals receiving services through this funding and on the services provided.

For successful applicant agencies who have an existing contract with an LME/MCO, North Carolina Treatment Outcomes and Program Performance System data must be reported as per pre-set intervals for submitting updates. More information can be found at https://nctopps.ncdmh.net/dev/GettingStartedWithNCTOPPS.asp.

The successful applicants will be required to submit a monthly Financial Status Report (FSR) and a monthly program report. Both will be provided to the applicant post award.

The FSR will detail expenditure of the grant funds and the monthly program report will provide DMH/DD/SAS with data necessary to demonstrate program outcomes. Both reporting forms, including supporting documentation for the FSR (i.e., receipts, proof of payment, etc.) are to be submitted to the contract administrator by the 10th of each month.

5.5 QUALIFICATIONS AND CAPACITY

Sub awardees must have internal controls in place and use generally accepted accounting principles (GAAP). Successful applicants will show no more than two audit findings in their most recent audit. Successful applicants will have a proven track record of collaboration with community partners to better assure sufficient resources are available to individuals to meet treatment and recovery needs.

6.0 PERFORMANCE OVERSIGHT

The Division of Mental Health, Developmental Disabilities and Substance Abuse Services assumes responsibility for monitoring the performance of the selected applicants and the outcomes of these projects.

7.0 TERM OF AWARD, OPTIONS TO EXTEND

The performance period for this project begins September 1, 2022 – September 30, 2025-March 14, 2023. These applications will be supported with funds from the SABG COVID-19 Supplement funding. Any extension of funding or the funding period will be determined by the availability of funds and status of goals and outcomes.

8.0 BUDGET

Supporting Transitional Age Youth (TAY) with SUD in Need of Recovery Housing

Funds for this TAY grant project will be awarded via a direct contract between the successful applicants and DMH/DD/SAS. Total of \$1,000,000 available, \$500,000 per provider.

The line-item budget shall constitute the total cost to DMH/DD/SAS for the complete performance in accordance with the requirements and specifications herein, including all applicable expenses such as administrative cost. The applicant shall not invoice for any amounts not specifically allowed for in the line-item budget of this RFA.

The total budget is inclusive of the following services:

- Provision of recovery supported housing for TAY. (These funds cannot be used to purchase a property but can be used to cover 'minor' renovations)
- Administration of an appropriate screening tool that identifies treatment and non-treatment needs
- Review of the screening tool
- Support with connecting to appropriate treatment and non-treatment resources
- Education on areas/topics of need
- All reporting and data collection requirements outlined in this RFA

All applicants must include in their budget, the expected number of individuals to be served.

Other services, such as those provided by a physician, PA or NP, including approved Evaluation and Management (E&M) codes, as well as the comprehensive clinical assessment performed by a licensed clinician, may be billed separately and outside the proposed budget, if such funding arrangement exists. Additionally, services provided by a specialized SUD treatment provider may be billed separately, provided the patient meets medical necessity criteria for these services/levels of care.

Residential Substance Use Disorder Treatment for Adolescents

Funds for this project will be awarded via a direct contract between the successful applicants and DMH/DD/SAS. Total of \$1,000,000 available, \$500,000 per provider.

The line-item budget shall constitute the total cost to DMH/DD/SAS for the complete performance in accordance with the requirements and specifications herein, including all applicable expenses such as administrative cost. The applicant shall not invoice for any amounts not specifically allowed for in the line-item budget of this RFA.

The total budget is inclusive of the following services:

- Costs associated with establishing an adolescent SUD residential program, including, but not limited to:
 - Securing a lease on a property (These funds cannot be used to purchase a property).
 - Refurbishing (minor renovations only) a property so that it meets standards necessary to provide safe and secure residential SUD treatment services.

- Purchasing furniture and other materials necessary for the delivery and management of an adolescent residential SUD treatment program.
- Securing licensure for the program and ensuring the program/facility meets all other regulations for residential SUD treatment programs.
- Purchasing and implementing an evidence-based treatment model/program that is appropriate for adolescents SUD with co-occurring needs.
- o Implementing necessary data collection and reporting tools.
- Staff recruitment and retention.
- Education on substance use, SUD, and co-occurring disorders to family members/caregivers.

All applicants must include in their budget, the expected number of individuals to be served.

Other services, such as those provided by a physician, PA or NP, including approved Evaluation and Management (E&M) codes, as well as the comprehensive clinical assessment performed by a licensed clinician, may be billed separately and outside the proposed budget, if such funding arrangement exists. Additionally, services provided by a specialized SUD treatment provider may be billed separately, provided the patient meets medical necessity criteria for these services/levels of care.

Developing SUD Treatment & Recovery Services for LGBTQ+ Populations

Funds for the training and technical assistance component of this RFA will be awarded as a direct contract between DMH/DD/SAS and the successful applicant agency. The funds will be awarded on a reimbursable basis and will be paid each month, following the submission and approval of the FSR. Total of \$250,000 available for one organization.

The line-item budget shall constitute the total cost to DMH/DD/SAS for the complete performance in accordance with the requirements and specifications herein, including all applicable expenses such as administrative costs. The applicant shall not invoice for any amounts not specifically allowed for in the line-item budget of this RFA.

A budget template has been supplied as part of this RFA and must be used by the applicant agency.

Funds for the treatment providers in this component of the RFA will be awarded via a direct contract between the successful applicants and DMH/DD/SAS. Total of \$600,000 available, \$200,000 per provider.

The line-item budget shall constitute the total cost to DMH/DD/SAS for the complete performance in accordance with the requirements and specifications herein, including all applicable expenses such as administrative cost. The applicant shall not invoice for any amounts not specifically allowed for in the line-item budget of this RFA.

The total budget is inclusive of the following services:

- Costs associated with agency readiness not provided through the training and technical assistance organization
- All reporting and data collection requirements outlined in this RFA
- Purchasing and implementing an evidence-based treatment model/program that is appropriate for the population
- Implementing necessary data collection and reporting tools
- Staff recruitment and retention

Services, such as those provided by a licensed clinician, physician, PA or NP, including approved Evaluation and Management (E&M) codes, as well as the comprehensive clinical assessment performed by a licensed clinician, must be billed separately, but are to be included as part of this budget.

All applicants must include in their budget, the expected number of individuals to be served.

9.0 REIMBURSEMENT

Funds will be awarded as a direct contract between DMH/DD/SAS and the successful applicant agencies. Funds associated with this RFA will be provided to the successful applicant on a reimbursement basis. The successful applicant will be required to submit a Financial Status Report (FSR) by the 10th of each month, detailing expediture during the reporting period. The FSR will be reviewed by the contract administrator against the approved budget. The FSR will then be processed for reimbursement.

10.0 THE SOLICITATION PROCESS

The following is a general description of the process by which agencies or organizations will be selected to complete the goal or objective.

- 1) Written questions concerning the RFA specifications will be received until the date specified on the cover sheet of this RFA. A summary of all questions and answers will be posted on the RFA website.
- 2) Applications will be received from each agency or organization. The original must be signed and dated by an official authorized to bind the agency or organization.
- 3) All applications must be received by the funding agency not later than the date and time specified on the cover sheet of the RFA. Faxed applications will not be accepted.
- 4) Applications from each responding agency and organization will be logged in at the date and time received.
- 5) At their option, the evaluators may request additional information from any or all applicants for the purpose of clarification or to amplify the materials presented in any part of the application. However, agencies and organizations are cautioned that the evaluators are not required to request clarification: therefore, all applications should be complete and reflect the most favorable terms available from the agency or organization.
- 6) Applications will be evaluated according to completeness, content, experience with similar projects, ability of the agency's or organization's staff, cost, etc. The award of a grant to one agency and organization does not mean that the other applications lacked merit, but that, all facts considered, the selected application was deemed to provide the best service to the State.
- 7) Agencies and organizations are cautioned that this is a request for applications, and the funding agency reserves the unqualified right to reject any and all applications when such rejections are deemed to be in the best interest of the funding agency.

11.0 GENERAL INFORMATION ON SUBMITTING APPLICATIONS

1) Award or Rejection

All qualified applications will be evaluated and awarded to those agencies or organizations whose capabilities are deemed to be in the best interest of the funding agency. The funding agency reserves the unqualified right to reject any or all offers if determined to be in its best interest. Successful Contractors will be notified no later than August 16, 2022.

2) Cost of Application Preparation

Any cost incurred by an agency or organization in preparing or submitting an application is the agencies or organizations sole responsibility; the funding agency will not reimburse any agency or organization for

any pre-award costs incurred.

3) Elaborate Applications

Elaborate applications in the form of brochures or other presentations beyond that necessary to present a complete and effective application are not desired.

4) Oral Explanations

The funding agency will not be bound by oral explanations or instructions given at any time during the competitive process or after awarding the grant.

5) Reference to Other Data

Only information that is received in response to this RFA will be evaluated; reference to information previously submitted will not suffice.

6) Titles

Titles and headings in this RFA and any subsequent RFA are for convenience only and shall have no binding force or effect.

7) Form of Application

Each application must be submitted on the form provided by the funding agency.

8) Exceptions

All applications are subject to the terms and conditions outlined herein. All responses will be controlled by such terms and conditions. The attachment of other terms and condition by any agency and organization may be grounds for rejection of that agency or organization's application.

9) Advertising

In submitting its application, agencies and organizations agree not to use the results therefrom or as part of any news release or commercial advertising without prior written approval of the funding agency.

10) Right to Submitted Material

All responses, inquiries, or correspondence relating to or in reference to the RFA, and all other reports, charts, displays, schedules, exhibits, and other documentation submitted by the agency or organization will become the property of the funding agency when received.

11) Competitive Offer

Pursuant to the provision of G.S. 143-54, and under penalty of perjury, the signer of any application submitted in response to this RFA thereby certifies that this application has not been arrived at collusively or otherwise in violation of either Federal or North Carolina antitrust laws.

12) Agency and Organization's Representative

Each agency or organization shall submit with its application the name, address, and telephone number of the person(s) with authority to bind the agency or organization and answer questions or provide clarification concerning the application.

13) Subcontracting

Agencies and organizations may propose to subcontract portions of work provided that their applications clearly indicate the scope of the work to be subcontracted, and to whom. All information required about the prime grantee is also required for each proposed subcontractor.

14) Proprietary Information

Trade secrets or similar proprietary data which the agency or organization does not wish disclosed to other than personnel involved in the evaluation will be kept confidential to the extent permitted by NCAC TO1: 05B.1501 and G.S. 132-1.3 if identified as follows: Each page shall be identified in boldface at

the top and bottom as "CONFIDENTIAL." Any section of the application that is to remain confidential shall also be so marked in boldface on the title page of that section.

15) Participation Encouraged

Pursuant to Article 3 and 3C, Chapter 143 of the North Carolina General Statutes and Executive Order No. 77, the funding agency invites and encourages participation in this RFA by businesses owned by minorities, women and the disabled including utilization as subcontractor(s) to perform functions under this Request for Applications.

16) Federal Certifications

i) Agencies or organizations receiving Federal funds will be required to execute Federal Certifications regarding Non-discrimination, Drug-Free Workplace, Environmental Tobacco Smoke, Debarment, Lobbying, and Lobbying Activities. A copy of the Federal Certifications is included in this RFA for your reference (see Appendix B). Federal Certifications should NOT be signed or returned with the application.

12.0 APPLICATION CONTENT AND INSTRUCTIONS

This section includes what the applicant is required to provide the Division with its application response. The applicant must clearly demonstrate (describe) in its proposal response how the applicant's organization will meet or address the programmatic requirements described in the scope of work section of the RFA. The applicant proposal shall include the following items in this specific order and clearly marked as such. Applications must be 10 pages or less, not including any attachments or appendices. See each section below for detailed information.

Whenever possible, use appendices to provide details, supplementary data, references, and information requiring in-depth analysis. These types of data, although supportive of the proposal, if included in the body of the proposal, could detract from its readability. Appendices provide the proposal reader with immediate access to details if clarification of an idea, sequence or conclusion is required. Timetables, work plans, schedules, activities, and methodologies, legal papers, personal vitae, letters of support, and endorsements are examples of appendices.

Applicants shall populate all attachments of this RFA that require the applicant to provide information and include an authorized signature where requested. Applicant RFA responses shall include the following items and those attachments should be arranged in the following order: Number each page consecutively. (Please provide the order of arrangement and content and page count if applicable).

Each applicant must clearly state which initiative in this RFA for which they are applying. Applicants may apply for one or more opportunities within this RFA, but each application should be separate.

A. Cover Page (at the beginning of this RFA) with all fields completed, signed by an authorized official of the applicant organization (not inclusive in the 10-page limit)

B. Face Page

- 1) The applicant's name, principal place of business and location where these services will be provided, if different.
- 2) The applicant's legal status: Confirmation that the applicant is a nonprofit or not-for-profit or tribal entity.

C. Proposal Summary (5 points)

The summary should be prepared after the application has been developed to encompass all the key points necessary to communicate the objectives of the project. It is the document that becomes the cornerstone of the proposal, and the initial impression it gives will be critical to success of the venture. In many cases, the summary will be the first part of the proposal package seen by the agency and very possible could be the only part of the package that is carefully reviewed before the decision is made to consider the project any further.

D. Organization Background and Qualifications (5 points)

Describe the organization and its qualifications for funding including:

- 1) Mission and goal of the Organization.
- 2) A brief overview of the applicant's history.
- 3) Describe the applicant's experience with providing the service and/or working with the selected population(s), working with the behavioral health system and cross-system partnerships (organizations past achievements and accomplishments and evidence of its impact).
- 4) Brief overview of all services provided by the applicant within the last five years, including (if applicable):
 - a) The beginning and ending dates of any contracts.
 - b) The services provided under those contracts.
 - c) The total number of applicant employees assigned to service each contract.
 - d) Whether any of those contracts were extended or renewed at the end of their initial terms.
 - e) Whether any of those contracts were terminated early for cause by either party to the contract.
 - f) The "lessons learned" from each of those contracts.
- 5) Qualifications/background on organization's Board of Directors and Key Staff.
- 6) Provide evidence of partnerships with other relevant agencies.
- 7) The details of:
 - a) Any criminal investigations pending against the applicant or any of their officers, directors, employees, agents, or subcontractors of which the applicants have knowledge or a statement that there are none.
 - b) Any regulatory sanctions levied against any of the applicants or any of their officers, directors, employees, agents, or subcontractors by any state or federal regulatory agencies within the past three years of which the applicant s have knowledge or a statement that there are none. As used herein, the term "regulatory sanctions" includes the revocation or suspension of any license or certification, the levying of any monetary penalties or fines, and the issuance of any written warnings.
 - c) Any regulatory investigations pending against of any of the applicants or any of their officers, directors, employees, agents, or subcontractors by any state or federal regulatory agencies of which the applicants have knowledge or a statement that there are none.
 - Note: The Department may reject a proposal solely based on this information.
 - d) Any of the applicant's directors, partners, proprietors, officers, or employees or any of the proposed project staff are related to any DHHS employees. If such relationships exist, identify the related individuals, describe their relationships, and identify their respective employers and positions.
 - e) Assurance that the applicant and the proposed applicant staff are not excluded from

participation by Medicaid or the Office of the Inspector General of the United States Department of Health and Human Services, if applicable.

8) Other major donors and summary of dollar amounts of contribution(s).

E. Assessment of Need/s (Problem Statement) (10 points)

- 1) Problem (explain why the service is necessary).
- 2) Describe what your organization is currently doing to address this problem.
- 3) Primary county/counties to be served (not applicable for training/TA applicant).
- 4) Ethnicity, age, and gender of population served.
- 5) Target population or who are you plan on serving (not applicable for training/TA applicant).
- 6) Number of individuals to be served by age (not applicable for training/TA applicant).
- 7) Eligibility requirements to receive service (not applicable for training/TA applicant).
- 8) Statistical facts and figures (national, state, local).
- 9) Program website.

F. Project Description and Narrative (30 points)

- 1) Describe the proposed project. For treatment providers, this should include detail (as appropriate and applicable) on the proposed project workflow, the recovery supported housing, the screening tool/s that will be used, the mechanisms for referral to treatment and non-treatment resources, the types of educational resources to be provided, training that agency staff will receive to support the project implementation, the subset of the TAY population to be served (if applicable) and the anticipated number of individuals to receive services under this grant (elaborate on how the anticipated number of adolescents to be served was chosen).
- 2) Describe how the proposed project will address health equity for historically marginalized populations and how the proposed project supports the development of strong infrastructure to improve access to quality services.
- 3) Explain how you engaged the priority population in developing this proposed project.
- 4) Detail how this project will address the community's and organization's needs.
- 5) List the goals, objectives, and anticipated outcomes of the project.
- 6) Include timelines for project implementation with specific program objectives as they relate to performance measures and budget (e.g., site acquisition or renovations, hiring staff or contractors, determining services to be provided, engaging participants, etc.).
- 7) Identify potential challenges the project may face (regulatory, environmental, or other constraints) and discuss how these challenges will be addressed and/or minimized.

G. Collaboration and Community Support (20 points)

As noted earlier in this RFA, the type and quality of partnerships that the successful applicant agency maintains will likely have a high impact on the success of the proposal. Therefore, the applicant is required to discuss the partnerships that they have or will establish if awarded the grant funds.

All applicant treatment provider agencies should

- 1) Describe how they will collaborate on this project with other relevant organizations in the community, and/or how this project will improve the collaboration between local stakeholders.
- 2) Describe the reasons for partnering with specific organizations.
- 3) Describe how you will verify that projects or services are not being duplicated in the community and

with the population served.

Letters of support that involve collaboration should be included with your grant application as an appendix and will not count toward the narrative page limit of this RFA. Please do not have letters sent separately to the Division. They will not be included in your application and will not be read by reviewers.

H. Potential Impact (10 points)

Explain why the proposed project is a good use of federal dollars. Describe the potential health impact and other effects on your community and its residents. Use research on program outcomes to identify what works. Whenever possible, quantify the possible economic savings and/or gains brought about by the project through program specific data.

Training and TA applicants should further explain how their services will better position North Carolina to implement, embody and better serve the LGBTQ+ populations.

I. Organizational Sustainability (10 points)

Describe how the project will contribute to the capacity of your organization or your community to address the needs of individuals described in this RFA. Treatment provider applicants must describe how the enhancements, improvements, or increases achieved during the project may be sustained past the funding term. Describe obstacles that may affect your organization's ability to sustain this program after the grant cycle and potential solutions to these identified challenges.

J. Line-Item Budget and Budget Narrative (10 points)

<u>Line-Item budget:</u> Attachment A is a line-item budget template that is to be submitted with this RFA. This does not count towards the page limit of this RFA.

<u>Budget Narrative</u>: The budget narrative should be included in the body of the proposal and will count towards the page limit of this RFA.

Every item that appears in the budget should be explained clearly, so the evaluator/ reviewer will understand it. The budget narrative should explain how the numbers in the budget were calculated and how each expense is related to the proposed project. The Budget Narrative is the justification of 'how' and/or 'why' a line item helps to meet the program deliverables. It is also used to determine if the cost in the contract is reasonable and permissible.

The budget should be for the period September 1, 2022 – September 30, 2025-March 14, 2023.

Salary Detail – Staff salaries and expenses for temporary/contract staff should be entered by position type in the appropriate section. For employed staff and temporary/contract staff, enter the average number of hours to be worked per week for each position type on the project.

- Summary Detailed cost breakdown for the project and all sources of funding identified for the project.
- Narrative Expanded details on line items in the budget.

Funds may not be used for purchase of land or buildings, nor may extensive renovations be completed with these funds. Equipment, such as computers, may be purchased with these funds if the cost is less than \$5000.00.

K. Supporting Documents (not inclusive of the 10-page limit)

- 1) An organizational chart identifying the personnel who will be assigned to work on this project.
- 2) Letters of support from key partners, including any proposed sub awardees.
- 3) Applicable Terms and Conditions (select and attach the appropriate Terms and Conditions for your organization type from Appendix A).
- 4) Applicable Certifications from Appendix A.
- 5) Other documents outlined above.

Submit the complete application, including signature of authorized representative, to RFA.responses@dhhs.nc.gov no later than 5:00 pm EST on Friday, August 2, 2022.

13.0 EVALUATION CRITERIA AND SCORING

PHASE I: INITIAL QUALIFYING CRITERIA

The applicant's proposal must meet all the following Phase I application acceptance criteria to be considered for further evaluation. Any proposal receiving a "no" response to any of the following qualifying criteria shall be disqualified from consideration.

ITEM	APPLICATION ACCEPTANCE CRITERIA	RFA	YES	NO
		Section		
1	Was the applicant's application received by the deadline specified in the RFA?			
2	Proposal includes all required affirmative statements, assurances and			
	certifications signed by the vendor's responsible representative, as described			
	in Appendix B of the RFA.			
3	Included in those certifications, the applicant states that it is not excluded			
	from entering a contract with DHHS/State due to restrictions related to the			
	federal debarment list, etc.			
4	Applicant meets eligibility requirements as stated in Section 2.0			
5	Applicant meets the minimum Qualification Requirements as described in			
	Section 5.5			
6	Program's review of the applicant verifies that the vendor is not excluded			
	from contracting with DHHS/State for any unresolved finding for recovery.			

PHASE II: CRITERIA FOR SCORING PROPOSAL/APPLICATIONS

Qualifying application proposals will be collectively scored by the proposal review team. All qualified applications will be evaluated, and awards made based on the following criteria considered, to result in awards most advantageous to the State. Applications will be scored on the content, quality, and completeness of the responses to the items in the scope of work and to how well each response addresses the following core factors. DHHS will consider scores, organizational capacity, and distribution among catchment areas, and variety of quality improvement plans in determining awards. Please note that applicants not meeting the eligibility requirements or any of the minimum or mandatory requirements as stated in Phase I will not be scored.

Evaluation Criteria	Score
Proposal Summary	5 points
Organizational Background and Qualifications	5 points
Assessment of Need / Approach to the Project	10 points
Project Description and Narrative	30 points
Collaboration and Community Support	20 points
Potential Impact	10 points
Organizational Stability	10 points
Line-Item Budget/Budget Narrative	10 points
Total Possible Score	100 points

Attachment A: Line Item Budget Proposal

Budget Categories	Narrative/Justification	Budget Amount
		7 9.01.22 –
		3.14.23
NON HOD		
NON-UCR		
Human Resources		
Salary/Wages (Include # of FTEs and position descriptions)		
Fringe Benefits		
HR/Other		
Operational Expenses/Capital		
Outlays		
Supplies and Materials		
Furniture		
Other		
Equipment		
Communication		
Office		
IT		
Assistive Technology		
Medical		

Other	
Travel	
Provider Staff	
Utilities	
Gas	

Electricity		
Telephone		
Water		
Other		
Repairs and Maintenance		
Staff Development (Provider Staff Only)		
Media/Communication/Public Affairs Advertising		
Audiovisual presentations/multimedia/tv/radio presentations Publications		
Public service announcements and ads		
Reprints		
Text translation into another language		
Websites and web materials		
Rent		
Office Space		
Equipment		
Furniture		
Other		
Professional Services		
Legal		

IT		
Accounting		
Payroll		
Security		
Other		
Audit Services		
Service Payments		
Insurance and Bonding		
Not Otherwise Classified		
Subcontracting and Grants		
Total Budgeted NON-UCR		
Expenditures		
Total Budget to be Billed		
(UCR)		
GRAND TOTAL BUDGET		